M1600000 3231

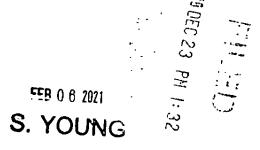
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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12/23/20--01020--007 **25.00





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: December 21, 2020

Order#: 581028-004

Re: NOVATUS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$\$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Meghan Groom

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. i	Name of the limited liability company:	0						
2. (a	13699 Via Varra	(1	(b) PO Box 7839					
(u)	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		, <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Broomfield, CO 80020	_	Broomfield, CO 80021					
	04/19/2016		M16000003231					
3.	Date of filing/registration in Florida	4.		Document nui	mber			
5. (C T Corporation System							
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
	1200 South Pine Island Road							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_ ,				
						25		
	Plantation, FI	33324				SEC DEC	ं ्रम्म • १	
					, =	\sim	****	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_		ω 		
	Enter name of NEW Registered Agent and/or NEW Registered	1 Office ad	dress;		·	7	- 2 E	
	Corporation Service Company					l: 32	ور	
	NEW Registered Office Address:			 -		10		
	1201 Hays Street			_				
	Tallahassee FL	32301						
chang agent was/v	limited liability company is not organized under the lay ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited have evere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registere ability co of the lim	ed office ar mpany, it i lited liabili	nd the business (is hereby confir ty company or a	office of the med that the	registe c chang	red e(s)	
	/s/ Omer Rafatullah	Ome	er Rafatulla	ah, Authorized F	Person			
Signature of a member or authorized representative of a member				Printed or typed name of signee				
provi the o to me	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I I ed in writing of this change.	performa	ince of mv	duties, and I an	n familiar w	ith and	accent	
Signa	ture of Registered Agent	Grace E	. Kirby, A	Asst. Vice Pres	ident			